



**STATE OF UTAH**  
**APPLICATION FOR CERTIFICATE OF REGISTRATION**  
**PORTABLE FIRE EXTINGUISHERS**

<b>TYPE OF APPLICATION</b> <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL <input type="checkbox"/> UPGRADE <input type="checkbox"/> 5 YEAR RETEST	<b>EE# No.</b>  <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
<b>Applicants Name</b> First Middle Last	
<b>Home Address:</b> Number and Street or PO Box  City State Zip	
<b>Telephone</b>	

<b>Name of Firm</b>	<b>Firm's State E License Number:</b>
<b>Address of Firm:</b> Number and Street or PO Box  City Utah Zip	

<b>Date of Birth:</b>	<b>Age:</b>	years	<b>Sex:</b> <input type="checkbox"/> M <input type="checkbox"/> F	<b>Color of Eyes:</b>
<b>Weight:</b>	lbs	<b>Height:</b>	ft	in
<b>Color of Hair:</b>				

<b>Have you ever been convicted of any crime?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
If "yes," indicate the date, type and location of the offense, the arresting agency, and the court disposition and sentencing information. (Use back of application)

<b><u>READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS APPLICATION:</u></b>	
I affirm that this application contains no misrepresentation or falsification and that the information is true and complete to the best of my knowledge and belief. I hereby understand and agree that a criminal history background check will be conducted on me and the information will only be used by the State Fire Marshal's Office to meet the requirements of Utah Administrative Code, R710-1-9.2.	
<b>Signature</b>	<b>Date</b>

<b>CHECK TYPE OF WORK PERFORMED</b>	
<input type="checkbox"/> 4. Service any type portable fire extinguisher, except systems.	
<input type="checkbox"/> 3. Conduct hydrostatic tests of water, dry chemical, and Halon fire extinguishers (except hydrostatic testing of containers listed as marked in conformance with U.S. Department of Transportation (DOT) regulations).	
<input type="checkbox"/> 2. Conduct hydrostatic tests of fire extinguisher cylinders listed and marked in conformance with DOT regulations.	
<input type="checkbox"/> 1. All activities as per (2), (3), and (4) above.	
<b>Have you taken the Utah Fire Extinguisher examination in the past?</b> <input type="checkbox"/> NO <input type="checkbox"/> YES <b>Date:</b>	

**Mail to: UTAH STATE FIRE MARSHAL, 5272 SOUTH COLLEGE DRIVE, SUITE 302, MURRAY, UTAH 84123-2611**

Original Date		Renewal Date		Renewal Date		Renewal Date		Renewal Date	
Amount Paid		Amount Paid		Amount Paid		Amount Paid		Amount Paid	
Receipt #		Receipt #		Receipt #		Receipt #		Receipt #	
Date cert sent		Date cert sent		Date cert sent		Date cert sent		Date cert sent	